

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/589055
	Filing Date	10 August 2006
	First Named Inventor	Gerhard KRUSE
	Title	Method and Device...
	Art Unit	
	Examiner Name	
	Attorney Docket Number	0740-81

I hereby revoke all previous powers of attorney given in the above-identified application.

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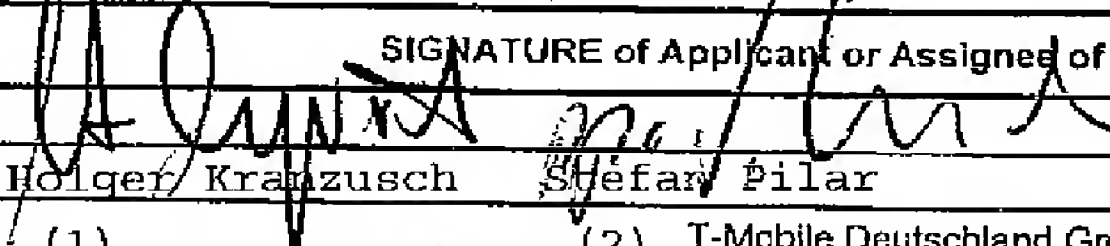
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☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record			
Signature			Date
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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